AMENDED IN ASSEMBLY JUNE 30, 2016 AMENDED IN ASSEMBLY JUNE 21, 2016 AMENDED IN SENATE AUGUST 31, 2015 AMENDED IN SENATE JULY 6, 2015 AMENDED IN SENATE JUNE 3, 2015

SENATE BILL

No. 423

Introduced by Senator Bates

February 25, 2015

An act to amend, repeal, and add Section 118215 of, and to add and repeal Section 118216 of, add Section 25218.14 to the Health and Safety Code, relating to hazardous waste.

LEGISLATIVE COUNSEL'S DIGEST

SB 423, as amended, Bates. Pharmaceutical and consumer Consumer product waste: management.

Existing law, the Medical Waste Management Act, administered by the State Department of Public Health, regulates the management, handling, and disposal of medical waste, as defined, including pharmaceutical waste. Existing law requires a person generating or treating medical waste to ensure that the medical waste is treated by a specified method, thereby rendering it a solid waste, before disposal, except in prescribed circumstances. Existing law requires the Department of Resources Recycling and Recovery, in consultation with the Department of Toxic Substances Control, to develop and implement a public information program to provide uniform and consistent information on the proper disposal of hazardous substances found in and around homes. Existing law—also provides for regulation of the

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disposition of hazardous waste by the Department of Toxic Substances Control. A violation of these provisions is a crime.

This bill, until January 1, 2022, would require a pharmaceutical that is offered for sale without a prescription, upon discard, to be managed in accordance the hazardous waste provisions if the pharmaceutical is a hazardous waste, or, if the pharmaceutical is not a hazardous waste, in accordance with the above-described medical waste provisions or specified solid waste provisions.

Because a violation of these provisions would be a crime, this bill would impose a state-mandated local program.

This bill would require the Department of Toxic Substances Control to convene a Retail Waste Working Group, as prescribed, to-identify regulatory and policy directives that need clarification or specification when applied to consumer products and to adopt consensus recommendations to facilitate and increase sustainable practices and waste reduction opportunities for consumer products and to encourage safe and efficient options for managing the flow of surplus household consumer products through the reverse supply chain. consider and make recommendations relating to requirements for the management of consumer products that are wastes, waste reduction opportunities for consumer products, and hazardous waste management requirements in the retail industry, as specified. The bill would require the working group to identify a list of issues for discussion and resolution by March 1, 2017, and to report—consensus these recommendations to the Legislature by June 1, 2017.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes-no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 25218.14 is added to the Health and
- 2 Safety Code, to read:
- 3 25218.14. (a) The department shall convene a Retail Waste
- 4 Working Group comprised of representatives of large retailers,
- 5 small retailers, district attorneys, certified unified program

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agencies, nongovernment organizations, other relevant state agencies as determined by the department, manufacturers, reverse distributors, and other stakeholders to consider and make recommendations on the following:

- (1) Regulatory and policy requirements that may be considered confusing or may need clarification or specification when applied to the overall management of consumer products that are wastes, including those that are considered hazardous wastes when the waste determination is made.
- (2) Consensus policy or regulatory recommendations to facilitate and increase waste reduction opportunities for consumer products and to clarify hazardous waste management requirements in the retail industry to encourage safe and efficient options for managing waste and surplus consumer products.
- (b) By June 1, 2017, the Retail Waste Working Group shall report the recommendations made pursuant to subdivision (a) to the Legislature.

SECTION 1. Section 118215 of the Health and Safety Code is amended to read:

- 118215. (a) Except as provided in subdivisions (b) and (c) and Section 118216, a person generating or treating medical waste shall ensure that the medical waste is treated by one of the following methods, thereby rendering it solid waste, as defined in Section 40191 of the Public Resources Code, before disposal:
- (1) (A) Incineration at a permitted medical waste treatment facility in a controlled-air, multichamber incinerator, or other method of incineration approved by the department that provides complete combustion of the waste into carbonized or mineralized ash.
- (B) Treatment with an alternative technology approved pursuant to paragraph (3), which, due to the extremely high temperatures of treatment in excess of 1,300 degrees Fahrenheit, has received express approval from the department.
- (2) Steam sterilization at a permitted medical waste treatment facility or by other sterilization, in accordance with all of the following operating procedures for steam sterilizers or other sterilization:
- (A) Standard written operating procedures shall be established for biological indicators, or for other indicators of adequate sterilization approved by the department, for each steam sterilizer,

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including time, temperature, pressure, type of waste, type of container, closure on container, pattern of loading, water content, and maximum load quantity.

- (B) Recording or indicating thermometers shall be checked during each complete cycle to ensure the attainment of 121 degrees centigrade (250 degrees Fahrenheit) for at least one-half hour, depending on the quantity and density of the load, to achieve sterilization of the entire load. Thermometers, thermocouples, or other monitoring devices identified in the facility operating plan shall be checked for calibration annually. Records of the calibration checks shall be maintained as part of the facility's files and records for a period of two years or for the period specified in the regulations.
- (C) Heat-sensitive tape, or another method acceptable to the enforcement agency, shall be used on each biohazard bag or sharps container that is processed onsite to indicate that the waste went through heat treatment. If the biohazard bags or sharps containers are placed in a large liner bag within the autoclave for treatment, heat-sensitive tape or another method acceptable to the enforcement agency only needs to be placed on the liner bag and not on every hazardous waste bag or sharps container being treated.
- (D) The biological indicator Geobacillus stearothermophilus, or other indicator of adequate sterilization as approved by the department, shall be placed at the center of a load processed under standard operating conditions at least monthly to confirm the attainment of adequate sterilization conditions.
- (E) Records of the procedures specified in subparagraphs (A), (B), and (D) shall be maintained for a period of not less than two years.
- (3) (A) Other alternative medical waste treatment methods that are both of the following:
 - (i) Approved by the department.
 - (ii) Result in the destruction of pathogenic microorganisms.
- (B) Any alternative medical waste treatment method proposed to the department shall be evaluated by the department and either approved or rejected pursuant to the criteria specified in this subdivision.
- (b) Fluid blood or fluid blood products may be discharged to a public sewage system without treatment if its discharge is consistent with waste discharge requirements placed on the public

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sewage system by the California regional water quality control board with jurisdiction.

- (e) (1) A medical waste that is a biohazardous laboratory waste, as defined in subparagraph (B) of paragraph (1) of subdivision (b) of Section 117690, may be treated by a chemical disinfection if the waste is liquid or semiliquid and the chemical disinfection method is recognized by the National Institutes of Health, the Centers for Disease Control and Prevention, or the American Biological Safety Association, and if the use of chemical disinfection as a treatment method is identified in the site's medical waste management plan.
- (2) If the waste is not treated by chemical disinfection, in accordance with paragraph (1), the waste shall be treated by one of the methods specified in subdivision (a).
- (3) Following treatment by chemical disinfection, the medical waste may be discharged to the public sewage system if the discharge is consistent with waste discharge requirements placed on the public sewage system by the California regional water quality control board, and the discharge is in compliance with the requirements imposed by the owner or operator of the public sewage system. If the chemical disinfection of the medical waste causes the waste to become a hazardous waste, the waste shall be managed in accordance with the requirements of Chapter 6.5 (commencing with Section 25100) of Division 20.
- (d) This section shall remain in effect only until January 1, 2022, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2022, deletes or extends that date.
- SEC. 2. Section 118215 is added to the Health and Safety Code, to read:
- 118215. (a) Except as provided in subdivisions (b) and (c), a person generating or treating medical waste shall ensure that the medical waste is treated by one of the following methods, thereby rendering it solid waste, as defined in Section 40191 of the Public Resources Code, before disposal:
- (1) (A) Incineration at a permitted medical waste treatment facility in a controlled-air, multichamber incinerator, or other method of incineration approved by the department that provides complete combustion of the waste into carbonized or mineralized ash.

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(B) Treatment with an alternative technology approved pursuant to paragraph (3), which, due to the extremely high temperatures of treatment in excess of 1,300 degrees Fahrenheit, has received express approval from the department.

- (2) Steam sterilization at a permitted medical waste treatment facility or by other sterilization, in accordance with all of the following operating procedures for steam sterilizers or other sterilization:
- (A) Standard written operating procedures shall be established for biological indicators, or for other indicators of adequate sterilization approved by the department, for each steam sterilizer, including time, temperature, pressure, type of waste, type of container, closure on container, pattern of loading, water content, and maximum load quantity.
- (B) Recording or indicating thermometers shall be checked during each complete cycle to ensure the attainment of 121 degrees centigrade (250 degrees Fahrenheit) for at least one-half hour, depending on the quantity and density of the load, to achieve sterilization of the entire load. Thermometers, thermocouples, or other monitoring devices identified in the facility operating plan shall be checked for calibration annually. Records of the calibration checks shall be maintained as part of the facility's files and records for a period of two years or for the period specified in the regulations.
- (C) Heat-sensitive tape, or another method acceptable to the enforcement agency, shall be used on each biohazard bag or sharps container that is processed onsite to indicate that the waste went through heat treatment. If the biohazard bags or sharps containers are placed in a large liner bag within the autoclave for treatment, heat-sensitive tape or another method acceptable to the enforcement agency only needs to be placed on the liner bag and not on every hazardous waste bag or sharps container being treated.
- (D) The biological indicator Geobacillus stearothermophilus, or other indicator of adequate sterilization as approved by the department, shall be placed at the center of a load processed under standard operating conditions at least monthly to confirm the attainment of adequate sterilization conditions.
- (E) Records of the procedures specified in subparagraphs (A), (B), and (D) shall be maintained for a period of not less than two years.

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(3) (A) Other alternative medical waste treatment methods that are both of the following:

(i) Approved by the department.

- (ii) Result in the destruction of pathogenic microorganisms.
- (B) Any alternative medical waste treatment method proposed to the department shall be evaluated by the department and either approved or rejected pursuant to the criteria specified in this subdivision.
- (b) Fluid blood or fluid blood products may be discharged to a public sewage system without treatment if its discharge is consistent with waste discharge requirements placed on the public sewage system by the California regional water quality control board with jurisdiction.
- (c) (1) A medical waste that is a biohazardous laboratory waste, as defined in subparagraph (B) of paragraph (1) of subdivision (b) of Section 117690, may be treated by a chemical disinfection if the waste is liquid or semiliquid and the chemical disinfection method is recognized by the National Institutes of Health, the Centers for Disease Control and Prevention, or the American Biological Safety Association, and if the use of chemical disinfection as a treatment method is identified in the site's medical waste management plan.
- (2) If the waste is not treated by chemical disinfection, in accordance with paragraph (1), the waste shall be treated by one of the methods specified in subdivision (a).
- (3) Following treatment by chemical disinfection, the medical waste may be discharged to the public sewage system if the discharge is consistent with waste discharge requirements placed on the public sewage system by the California regional water quality control board, and the discharge is in compliance with the requirements imposed by the owner or operator of the public sewage system. If the chemical disinfection of the medical waste causes the waste to become a hazardous waste, the waste shall be managed in accordance with the requirements of Chapter 6.5 (commencing with Section 25100) of Division 20.
 - (d) This section shall become operative on January 1, 2022.
- SEC. 3. Section 118216 is added to the Health and Safety Code, to read:
- 118216. (a) Notwithstanding Section 117690, a pharmaceutical that is offered for sale without a prescription shall, upon discard,

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be managed in accordance with Chapter 6.5 (commencing with Section 25100) of Division 20 if it is a hazardous waste as defined in Section 25117 and implementing regulations. If the pharmaceutical is not a hazardous waste, it shall be managed in accordance with one of the following:

(1) Section 118215.

- (2) Provisions relating to solid waste pursuant to Division 30 (commencing with Section 40000) of the Public Resources Code.
- (b) This section shall remain in effect only until January 1, 2022, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2022, deletes or extends that date.
- SEC. 4. (a) The Department of Toxic Substances Control shall convene a Retail Waste Working Group comprised of representatives of large retailers, small retailers, district attorneys, certified unified program agencies, nongovernment organizations, the State Department of Public Health, manufacturers, reverse distributors, and other stakeholders to do both of the following:
- (1) Identify regulatory and policy directives that need elarification or specification when applied to consumer products.
- (2) Adopt consensus recommendations to facilitate and increase sustainable practices and waste reduction opportunities for consumer products and to encourage safe and efficient options for managing the flow of surplus household consumer products through the reverse supply chain.
- (b) By March 1, 2017, the Retail Waste Working Group shall identify a list of issues for discussion and resolution and, thereafter, shall meet regularly to assist and advise the Legislature, and shall report the consensus recommendations to the Legislature by June 1, 2017.
- SEC. 5. No reimbursement is required by this act pursuant to Section 6 of Article XIIIB of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIIIB of the California Constitution.